Signature

SCHEDULE E (FEC Form 3X)

501125022 2 (1 20 1 01111 0/4)					
TEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 23	
NAME OF COMMITTEE (In Full)			-	FOR LINE 24 OF FORM 3X	
WOMEN VOTE!				C IDENTIFICATION NUMBER ▼	
			C	C00473918	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y	
Full Name of Payee Deliver Strategies, LLC			M - N		
Mailing Address 4301 Fairfax Dr			07	28 2018	
Ste 550			Amount		
City	State	Zip Code		21416.04	
Arlington	VA	22203-1627	Transaction ID : VN7A7AAYG25 Date of Disbursement or Obligation		
Purpose of Expenditure Mailhouse		Category/ Type 004	M = N		
Name of Federal Candidate:		X Support	Office Sought:	✗ House District:03	
DAVIDS, SHARICE, , ,		Oppose	President	Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought	7	708092.40	Disbursement Fo	or: x Primary General	
Full Name of Payee Deliver Strategies, LLC				ublic Distribution/Dissemination	
Mailing Address 4301 Fairfax Dr Ste 550			Amount		
City	State	Zip Code		21937.02	
Arlington	VA	22203-1627	Transact	Transaction ID : VN7A7AAZ298 Date of Disbursement or Obligation	
Purpose of Expenditure Mailhouse		Category/ Type 004	07		
Name of Federal Candidate:		✗ Support	Office Sought:	▼ House District:03	
DAVIDS, SHARICE, , ,			President	Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought	7	708092.40	Disbursement Fo	or: x Primary General (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	\$		·	43353.06	
(b) SUBTOTAL of Unitemized Independent Expenditu	res		·	7	
(c) TOTAL Independent Expenditures			•	7	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized				
Fines, Caroline, , ,	[Electronically File	led] Data	M M / D	2018	